

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 1995

Application or Docket Number

08/603497

CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	40	minus 20 = * 20
INDEPENDENT CLAIMS	5	minus 3 = * 2
MULTIPLE DEPENDENT CLAIM PRESENT		

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

RATE	FEE
	375.00
x\$11=	
x39=	
+125=	
TOTAL	

OR

OR

OR

OR

OR

OR

RATE	FEE
	750.00
x\$22=	440.00
x78=	234.00
+250=	
TOTAL	1424.00

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**	=
	Independent	*	Minus	***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

RATE	ADDI- TIONAL FEE
x\$11=	
x39=	
+125=	
TOTAL	

OR

OR

OR

OR

OR

RATE	ADDI- TIONAL FEE
x\$22=	
x78=	
+250=	
TOTAL	

(Column 1) (Column 2) (Column 3)

AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**	=
	Independent	*	Minus	***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

RATE	ADDI- TIONAL FEE
x\$11=	
x39=	
+125=	
TOTAL	

OR

OR

OR

OR

OR

RATE	ADDI- TIONAL FEE
x\$22=	
x78=	
+250=	
TOTAL	

(Column 1) (Column 2) (Column 3)

AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**	=
	Independent	*	Minus	***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

RATE	ADDI- TIONAL FEE
x\$11=	
x39=	
+125=	
TOTAL	

OR

OR

OR

OR

OR

RATE	ADDI- TIONAL FEE
x\$22=	
x78=	
+250=	
TOTAL	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

Date of Request: 6/5/96 2 Serial/Patent # 08/603,497

Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
Filing			\$
Amendment			\$
Extension of Time			\$
Notice of Appeal/Appeal			\$
Petition			\$
Issue			\$
Cert of Correction/Terminal Disc.			\$
Maintenance			\$
Assignment			\$
Other <u>Claims</u>			\$ <u>78</u>

7 TOTAL AMOUNT OF REFUND

\$ 78

8 TO BE REFUNDED BY:

REASON:

Overpayment

Duplicate Payment

No Fee Due (Explanation):

☒ Treasury Check

☒ Credit Deposit A/C #:

9. 08 -- 2334

REFUND REQUESTED BY:

SIGNED/PRINTED NAME: Tanya Clark

TITLE: Examiner

SIGNATURE: Tanya Clark

PHONE: 301-1901

OFFICE: UTPE

THIS SPACE RESERVED FOR FINANCE USE ONLY:

APPROVED: Frankie Charles

DATE: 6-11-96

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B